

In re application of:
 Serial No: 10/076,510
 Filed: February 19, 2002
 For: Method of measuring traffic volume in mobile communication system

Art Unit: 2616
 Examiner: Blanche Wong
 Confirmation No. 3418

Mail Stop RCE
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:
 Transmitted herewith is a Request for Continued Examination in the above-identified application.

- ☒ A petition for extension of time for 3 month(s) is enclosed.
☒ Request for Continued Examination transmittal is enclosed.
☐ An information disclosure statement in accordance with 37 CFR 1.56 and 1.97 is enclosed.
☐ Form PTO-1449 is enclosed.
☐ No additional fee is required.

The fee has been calculated as shown below:

REGISTRATION SERVICE FEE SCHEDULE								
	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE	
TOTAL CLAIMS FEE	25	-	31	**	0	LG=\$50 SM=\$25	\$50	\$ 0
INDEPENDENT CLAIMS FEE	3	-	5	***	0	LG=\$200 SM=\$100	\$200	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS						LARGE ENTITY FEE = \$290 SMALL ENTITY FEE = \$145		\$ 0
TOTAL								\$ 0

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ A check in the amount of \$_____ to cover the filing fee is enclosed.
☐ A check in the amount of \$_____ to cover the extension fee is enclosed.
☐ A check in the amount of \$_____ to cover the information disclosure statement fee is enclosed.
☐ A check in the amount of \$_____ to cover the petition fee is enclosed.
☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 502290.
☒ The amount of \$ 570 for the extension fee.
☒ The amount of \$ 790 for the RCE fee.
☐ The amount of \$_____ for the filing fee of additional claims.
☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
☒ Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,
 Lee, Hong, Degerman, Kang & Schmadeka

Date: February 15, 2007

Customer No. 035884

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